PO Box 295 Trenton, NJ 08625-0295

NEW JERSEY DIVISION OF PENSIONS AND BENEFITS

REPORT OF TRANSFER / MULTIPLE ENROLLMENT FORM

See reverse side for instructions on completing this form.

INDICATE TYPE OF ACTION:

☐ REPORT OF TRANSFE	R or MUI	TIPLE ENROLLMENT (PERS and TPAF Only)
IN	DICATE RETIREMENT	SYSTEM:	
☐ Public Employees' Retirement Syste	m (PERS)	Teachers' Pension and Ann	uity System (TPAF)
☐ Police and Firemen's Retirement Sys	stem (PFRS)		
THIS SECTION TO BE COMPLETED BY T	HE MEMBER:		
Social Security Number:	Pension N	/lembership Number:	
Name:			
Name:	(First)	(Middle)	(Maiden)
Address:	(Street)		
(City)	(State)		(Zip Code)
Daytime Telephone:(Area Code)			
(Area Code)			
Date of Last Pension Deduction Reported by Name of New Employer: New Employer Location/Payroll Number: Is New Employer a Board of Education?		(Month/Year) or (Pay Period/Ye	ear)
Title of New Position:		Hire Date:	
Current Annual Base Salary: \$	Employee	is paid on: 🔲 10 month ba	asis 🔲 12 month basis
Is employee currently employed by more that	n one <i>public</i> agency?	☐ Yes ☐ No	
If yes, please list public agencies:			
Signature of Certifying Officer			r Extension
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Street Address	City	County	State Zip

INSTRUCTIONS

This form is to be completed for any member who leaves one New Jersey public employer to take a job with another New Jersey public employer but remains in the <u>same</u> retirement system. It is also used to establish <u>multiple enrollment</u> in the retirement system. A member establishes multiple enrollment when he or she is employed by more than one public agency at the same time in a position that is eligible for membership in the <u>same</u> retirement system.

If the new employment is covered by a <u>different</u> retirement system, an *Application for Interfund Transfer* should be completed instead of this form.

The Report of Transfer/Multiple Enrollment Form should be filed with the Division of Pensions and Benefits within 10 working days of the date employment begins. The employer should establish that the employee's membership in the retirement system has not expired or been withdrawn. If the employee's membership has expired or been withdrawn, the employee must complete a new *Enrollment Application*.

The Division of Pensions and Benefits will process the *Report of Transfer/Multiple Enrollment Form* and will send a *Certification of Payroll Deductions* to the new employer advising the employer of the date pension deductions must begin for the transferring employee.

Please forward the completed form to:

Enrollment Section
Division of Pensions and Benefits
PO Box 295
Trenton, NJ 08625-0295

IF ANY ITEMS ON THIS FORM ARE INCOMPLETE OR LEFT BLANK, IT WILL DELAY THE PROCESSING THE MEMBER'S TRANSFER OR MULTIPLE ENROLLMENT. THIS MAY RESULT IN ADDITIONAL BACK PENSION CONTRIBUTIONS AND CREATE A HARDSHIP FOR THE MEMBER. THEREFORE, THE CERTIFYING OFFICER SHOULD ENSURE THAT ALL ITEMS ARE COMPLETE PRIOR TO SUBMISSION OF THIS FORM.